CITY OF SAINT PAUL DIVISION OF PARKS AND RECREATION MUNICIPAL ATHLETICS 1500 N. RICE STREET SAINT PAUL, MN 55117

TEAM NAME	LEAGUE NAME			NIGHT OF PL	NIGHT OF PLAY	
SPORT	ADULT: MEN	WOMEN	CO-REC	FIELD SITE:_		
ROSTER REQUIE Rosters can be e	REMENT: Roster must be compl -mailed to:muni@ci.stpaul.mn.us, *All players must have a Minneso *Additions or subtractio *Additions must b	eted, signed, and suffax: 651-558-2237, on the Driver's License I was may be made until the received in writing	bmitted by team MANAGE or US postal/in person to: N.D., bordering State I.D., Mil 24 hours prior to the start of prior to the halfway point of	ERS to the Municipal Ath Municipal Athletics, 1500 litary picture I.D., or Comp f the second half of the leas f the season to Municipal A	nletics Office prior to first scheduled game. Rice St., St. Paul Mn. 55117 vany picture I.D. gue schedule. thletics.	
		ADDRESS				
***MANAGER'S E-MA	IL ADDRESS					
PLAYERS LISTED BE	LOW ARE MEMBERS OF THIS	TEAM AND ARE I	ELIGIBLE PARTICIPANT		Manager's Signature	
PLAYER'S NAME	HOME ADDRESS, CITY & ZIP	DAY PHONE	WORK ADDRESS	WORK PHONE	E-MAIL ADDRESS	

PLAYER'S NAME	HOME ADDRESS, CITY & ZIP	HOME PHONE	WORK ADDRESS	WORK PHONE	E-MAIL ADDRESS
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